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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70186

Title: "Primary central nervous system lymphoma presenting as a single choroidal lesion

mimicking metastasis: A case report"

Reviewer's code: 05274507 **Position:** Editorial Board

Academic degree: BHMS, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-07-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-23 10:51

Reviewer performed review: 2021-08-23 13:58

Review time: 3 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The article is interesting and well written. The author made a timely and accurate diagnosis and treatment for PCNSL. In addition to high-dose chemotherapy, elderly patients should be treated with maintenance therapy. The authors did not mention maintenance therapy.

Dear Reviewer

Thank you for considering our article for publication in the World Journal of Clinical Cases.

We are grateful to you and the reviewers for the valuable suggestions provided.

The comments were helpful in making our manuscript more informative and valuable.

We have revised our manuscript in response to the reviewer's comments.

We have provided point-by-point responses to the reviewer's comments below.

We hope that these changes are satisfactory.

Answer

We appreciate your keen comments.

We have added more details about maintenance therapy in the Outcome and Follow-up section of the revised manuscript (lines 133-134).

"We recommended maintenance therapy for this patient, but he refused the treatment due to concerns about the side effects of additional chemotherapy."



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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70186

Title: "Primary central nervous system lymphoma presenting as a single choroidal lesion

mimicking metastasis: A case report"

Reviewer's code: 05347087 Position: Editorial Board Academic degree: MD, PhD

Professional title: Assistant Professor, Consultant Physician-Scientist, Doctor

Neurosurgeon, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Italy

Author's Country/Territory: South Korea

Manuscript submission date: 2021-07-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-24 14:11

Reviewer performed review: 2021-08-24 14:52

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y] Yes [] No
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Some points are not clear:

1. Lines 38: "was compatible with metastasis?" Which was the primary tumor?

Thank you for considering our article for publication in the *World Journal of Clinical Cases*. We are grateful to you and the reviewers for the valuable suggestions provided. Here are our point-by-point responses to the reviewer's comments.

We believe that these modifications have strengthened the manuscript, and hope that the revised manuscript is suitable for publication in the *World Journal of Clinical Cases*.

Answer

We agree with the reviewer and have edited the text for clarity.

The choroidal lesion was observed as a lesion mimicking metastasis. As pointed out, there was misleading expression "compatible." It was an expression that could be interpreted differently than intended. We have revised every relevant sentence to clarify the expression. Thank you again for reviewer's keen comment.

We have inserted this revised explanation into the Case Summary section of the Abstract (lines 46-48), Introduction section (lines 78-80) and Physical examination section of Case presentation (lines 99-100).

Metastasis was suspected, and imaging examinations were performed to identify the primary malignancy. Related content is described in the manuscript, Imaging examination section of Case presentation. (lines 107-110).



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Lines 46-48

"Herein, we report the case of a 78-year-old man who presented with a choroidal lesion in his right eye that mimicked metastasis without evidence of extraocular involvement."

Lines 78-80

"Herein, we report a very rare case of primary choroidal lymphoma diagnosed as diffuse large B-cell lymphoma (DLBL), which initially presented as a unilateral choroidal lesion mimicking metastasis."

Lines 99-100

An ophthalmological examination revealed exudative subretinal detachment with a choroidal lesion suspicious of metastasis in the right eye (Figure 1A).

Lines 107-110

"To identify the primary tumor, the patient was referred to the Department of Hemato-oncology at our institute. Brain magnetic resonance imaging (MRI) and computed tomography (CT) of the neck, chest, and abdomen-pelvis showed no malignant lesions."

2. Lines 90-92: "Laboratory examinations. The results of laboratory tests were in normal range except LDH. His LDH was 387U/L (119-229U/L). " Are these data necessary?

Answer

Thank you for the important comment. We hope for your generous understanding. (Lines 103-105)



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The International Prognostic Index (IPI) was originally designed as a prognostic factor model for aggressive non-Hodgkin's lymphoma. IPI includes the following five factors, age, elevated LDH level, stage, ECOG performance status and number of extranodal involvements. Baseline serum LDH level is one of the factors used to calculate the IPI score.

In our patient, the laboratory test results were within the normal range except for elevated LDH levels. This is the reason that we have mentioned the laboratory test results.

3. Lines 195-200: Conclusions. What add this paper new to the literature?

Answer

Thank you for the important comment. We would like to highlight the following: Unlike previously reported cases of primary choroidal lymphoma, our case report is about a primary choroidal lymphoma identified as high grade B-cell lymphoma. We have revised the Title, Discussion and Conclusion to depict the significance of our paper to the literature.

Discussion "Lines 156-169"

Primary choroidal lymphomas are mainly low grade B-cell lymphomas such as extranodal marginal zone B-cell lymphoma, are usually unilateral, and typically do not progress to the central nervous system parenchyma. Secondary choroidal lymphoma is characterized by the presence of previously known cancer or concurrent systemic lymphomas at the initial ocular presentation. In contrast to primary choroidal lymphomas, secondary choroidal lymphomas are more likely to demonstrate bilateral involvement and preexistent lymphomas. More than half of secondary choroidal lymphomas have been confirmed as high-grade B-cell



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lymphomas, such as DLBL.

Unlike the previously reported cases of primary choroidal lymphoma, this case was characterized by the pathological findings of DLBL and disease progression to the brain parenchyma within a few months. In most of the previous cases of primary choroidal lymphoma, management involved local treatment or observation, whereas in our case, HD-MTX-based chemotherapy was administered, and the treatment response was complete remission.

CONCLUSION ("171-175")

Primary choroidal lymphoma is generally known to have a benign clinical course without systemic involvement. We reported a rare case of primary choroidal lymphoma diagnosed as DLBL, characterized by an aggressive clinical course that progressed to the brain parenchyma within a few months.

Thank you again for your careful and important comments. The comments were helpful in making our manuscript more informative and valuable.

Best regards,

Corresponding author: Kyu-Hyoung Lim, Doctor, MD, PhD

Associate Professor, Internal Medicine, Kangwon National University School of Medicine

Baengnyeong-ro, Chuncheon-si, Gangwon-do 24289, Republic of Korea , Chuncheon 24289, South Korea.

kyuhyoung.lim@gmail.com

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